

## Notice of Recommendation for Immediate Intervention

Name of Youth: \_\_\_\_\_ Date of Intake: \_\_\_\_\_

Permanent Address of Youth: \_\_\_\_\_

Alleged Offense(s): \_\_\_\_\_

\_\_\_\_\_

Date of Alleged Offense: \_\_\_\_\_ County Alleged Offense Occurred in: \_\_\_\_\_

County/District Attorney: \_\_\_\_\_ Date of Recommendation: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Additional Comments: \_\_\_\_\_

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